



healthwatch

Bradford and District

Healthwatch Bradford and District

Annual Report 2016/17



Contents

Message from our Chair and Manager	3
Highlights from our year	5
Who we are.....	6
Your views on health and care.....	7
Helping you find the answers	14
Making a difference together	16
It starts with you	20
Our plans for next year	23
Our people	25
Our finances	30
Contact us.....	35



Message from our Chair and Manager



Javed Khan, Chair of Healthwatch
Bradford and District

This has been a year of change both for Healthwatch Bradford and District and for the whole health and social care system.

At the start of the year, the Council put out to tender the contract for Healthwatch. We'd like to thank the staff team for their resilience and continued hard work during the period of uncertainty this created. It's a reflection on their hard work that we successfully secured the Healthwatch contract for another three years, and although the budget is smaller we're determined to continue to 'punch above our weight' and make a real difference for local people.

Andrew Jones, who has led the organisation since 2013, decided to step down in the summer which was a great loss. Andrew's hard-work and dedication made such a difference. This is another opportunity for us all to say thank you for his leadership of Healthwatch Bradford and District from 2013-2016.

However, Victoria Simmons has been involved in Healthwatch Bradford and District since the start, so the Board and staff were pleased to see her appointed as Manager in September 2016.

Local Healthwatch is here to make a difference for people and communities, and in Bradford and District that's very much a team effort.

We've seen changes in our team this year, welcoming new people to work with us, either on short term projects or as long-term members of the team, as volunteers, and as Board members. You can read more about the current staff, volunteer and Board teams on pages 25-29, and you'll see that we're a diverse bunch of people. What brings us together is a shared passion for helping people speak out, and a belief that health and care can be better when it's built around the needs of local people.

The Healthwatch team also extends to include all the people who share their experiences with us. Without your views and your voices, Healthwatch would have no purpose or power. This year's 'It Starts With You' theme highlights the impact that Healthwatch have been able to make as a result of you sharing your experiences with us. Thank you.

We've done some important work to highlight issues for people affected by Autistic Spectrum Conditions; our report was powerful because it was rooted directly in people's stories.

As a result, we're starting to see some positive changes and local commissioners and providers are really taking note of what we have to say.

The strength of our relationships with partners in health services, the Council, and Bradford's vibrant VCS is more important than ever. The landscape of health and social care is changing again, and we need to work with all our partners to make sure that local people's views and experiences are at the heart of any changes to services.

Andrew Jones and Victoria Simmons,
Healthwatch Bradford and District
Managers past and present





Highlights from our year

This year we heard from 461 people through our online surveys



Our 28 volunteers help us with everything from carrying out surveys to data input



We spoke to over 300 people in local A&E departments to find out about their experiences



Our work has been featured in national reports on autism and access to dentists



We've heard 1500 comments during outreach sessions



We visited services for people with learning disabilities to find out what works well





Who we are

Healthwatch Bradford and District is here to make sure local people get the best from health and social care services.

We listen to people's experiences of health and social care services today, and we give them a voice on how they are designed for the future.

We're a small, independent organisation - with a big job to do. We work across the whole district, covering all publicly funded health and social care services.

Everything we say and do is informed by our connections to the people and communities of Bradford District.

Healthwatch Bradford and District has strong relationships with decision makers in health and care; we know they take us seriously, value our independent insight, and act on what we say.

Our vision

We believe that by listening to local people, understanding their experiences, and involving them in decisions, health and social care can be better for everyone.

We strive for equal access, outcomes, and treatment for everyone using health and social care services in our district.

By helping people find the information they need, and connecting them to advice or support, we help people make positive choices and have healthier lives.





***Your views on
health and care***

Listening to local people's views

Healthwatch listen to your views on health and care in several ways:

- We hold outreach sessions in local hospitals and community venues.
- Staff and volunteers talk to the public about the issues that matter to them and record their experiences of health and care.
- Members of the public contact us by phone, email or via the website to share their experiences and views.
- Based on issues that emerge from public feedback, Healthwatch carry out focused projects to look into people's experiences in more depth.

We pay particular attention to listening to people who might find it harder to speak out, or whose views might otherwise not be taken into account. For example, throughout this year we've engaged with:

- Young people, children and their parents
- Older people, including those living in care homes
- People with learning difficulties and disabled people
- People whose first language isn't English
- Carers

Children's outpatients

In April and May 2016, Healthwatch staff and volunteers focused our outreach sessions on children's outpatient departments at St Luke's Hospital in Bradford.

We worked with the hospital staff to make sure that we were gathering feedback that could lead to positive changes being put into practice.

Children and their parents talked to Healthwatch about their experiences of coming to hospital - we spoke to 168 people in total.

The feedback from our conversations was shared with the department staff and with managers at the Trust. Our report made recommendations for practical changes to make the environment better for children while they wait, and for giving more information to families about what to expect at an appointment.

A young volunteer drew pictures based on the Healthwatch branding, which we turned into stickers to give out to children who spoke to us during the survey.



Adult social care contributions

Bradford Council proposed making changes to the way they worked out how much people had to pay towards their care. Healthwatch heard from worried members of the public, who thought the changes would have a serious effect on the quality of life for people living with disabilities.

People felt they were struggling to get their voices heard, and they found the Council's consultation difficult to take part in.

Healthwatch raised concerns with the Council about the consultation. The Council agreed to extend the consultation period and to send out improved information which they said would include examples and be more accessible.

Healthwatch put information about the extended consultation on our website, on social media, and in our newsletter. We encouraged people to share their views in the Council's consultation.

Healthwatch worked with partner organisations to understand their perspectives on the changes, including People First organisations in Bradford and Keighley, Choice Advocacy, the Parents Forum, and some supported living services.

We also met with service-users and carers, to enable people to share the direct impact that the proposed changes would have on their lives.

Healthwatch gathered their views into a report, which was presented to the Council at a public meeting. It included case studies which brought to life the impact that the changes would make, and carers of people with disabilities were able to directly address Councillors at the meeting

Hear See & Treat

During the summer of 2016, Healthwatch organisations across West Yorkshire and the Harrogate District worked together to engage with the public on the proposed model for 'Hear, see and treat'.

'Hear, see and treat' is a new idea would enable paramedics to deliver a much wider range of care and treatment options, rather than just taking the patient to A&E. They would have the help of a team of doctors and nurses available by phone.

To find out what people thought about the idea, a wide range of activity took place, including online surveys, outreach sessions in outpatient departments, and with voluntary and community groups.

We used Facebook, Instagram and third party website advertising to promote an explainer animation that encouraged people to share their views.

The results from our surveys show us that the majority of people that responded supported the proposals.

The experiences of people affected by Autistic Spectrum Conditions

In January 2017 we published a report on **'Autistic Spectrum Conditions: What we have heard so far'**.

We published the report after hearing about difficulties people were facing around referrals for diagnosis and subsequent support for those on the autistic spectrum.

Significant numbers of people told us that they could not get a referral for diagnosis, or if they did get a referral they had to wait up to 3 years for a diagnosis. Healthwatch Bradford decided to look into this in more depth.

Our work has had significant impact in drawing attention to the issue.

Healthwatch was pleased to learn that the funding for diagnostic services for adults was increased by 45% to help reduce the waiting list for those awaiting diagnosis.

A specific all-age Strategy on Neuro-Diversity including Autism is being developed in partnership by local health commissioners and the council, which will be implemented soon. This aims to improve the situation for those with an autistic spectrum condition. The overall strategy includes a Training Strategy, addressing some of the training needs and requirements for people who are engaging with those on the spectrum.

Healthwatch team members take an active role in the Autism Partnership Board, ensuring that the experiences we hear from the public are helping to shape future plans for services.

As the work continues, we are hearing more from people about support for those on the spectrum. People have told us that not enough support is available in Bradford for those on the spectrum or their families.

Autism is an ongoing strand of work, supported by the Healthwatch Board, which will continue to be developed in 2017/18.

Read about how one family's experience helped shape our work on autism on page 21.

#ItStartsWithYou



People's experiences of using A&E at our local hospitals

NHS Accident and Emergency departments are often the focus of media and political attention, with emphasis on performance targets and increasing demand.

As in our previous work (2013 and 2014) Healthwatch wanted to find out more about people's experience of using the services, including their reasons for attendance and how they felt about aspects of their journey through the department, from arriving to being discharged.

In May 2016, the Healthwatch staff and a team of volunteers visited both Airedale General Hospital and Bradford Royal Infirmary. We spent a total of 30 hours in each department, and spoke to over 300 patients and carers.

Following this engagement, we produced individual reports for each Trust highlighting positive feedback as well as areas for improvement. These reports were shared with Clinical Commissioning Groups and presented at the Joint Quality Committee and the A&E Delivery Board for the District.

The CCGs and each hospital have responded to our recommendations with plans for how they will make improvements.

Our reports and the CCG's responses are published on our website.

Many local people told us that they ended up in A&E after receiving advice from other parts of the health system, such as 111, or because they were unable to access alternatives, such as GP appointments. Local commissioners and providers told us that this insight, including a breakdown of sources of advice, was important and would help them prioritise work to improve access both in Primary Care and Urgent and Emergency Care.

An observation from our visits to A&E at Airedale General Hospital led to the staff team making simple, practical changes to help parents visiting the department with children. Read more on page 22.

#ItStartsWithYou

Telemedicine in care homes

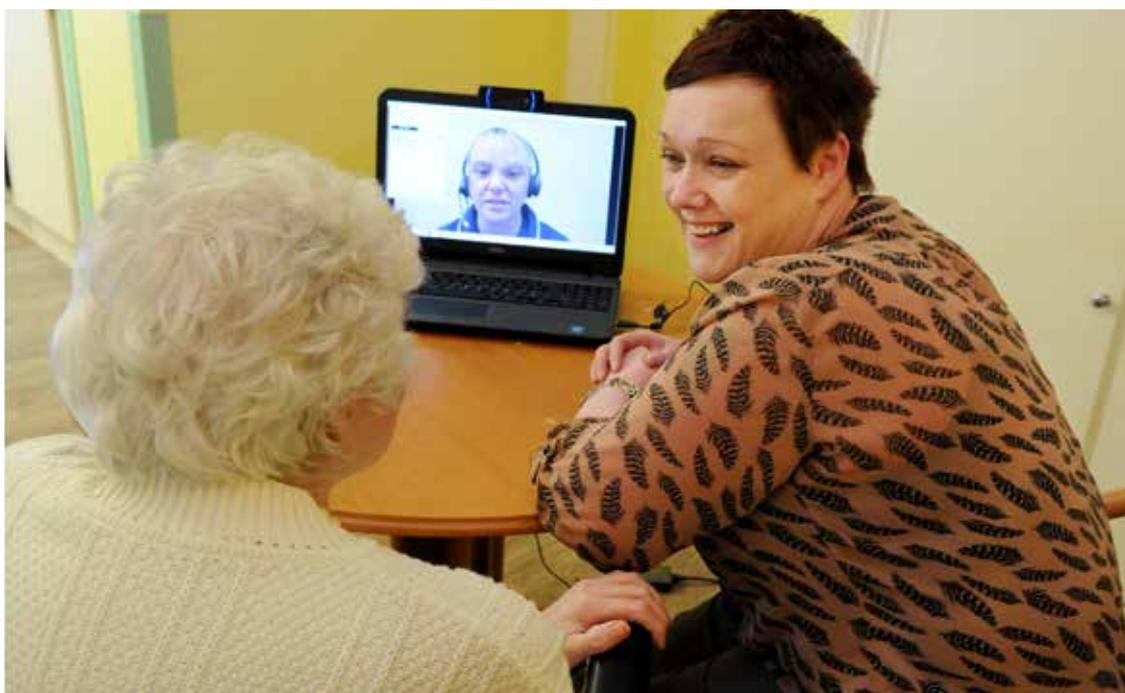
We were asked by Airedale Hospital to understand how Telemedicine services are affecting care for people living in care homes. This was part of the NHS Vanguard project which is working with care homes in our area to test out new ways of delivering healthcare for residents.

The local NHS Vanguard project is based at the Airedale Hospital in Steeton, where nurses, occupational therapists and other health staff provide 'Telemedicine' support to people in care homes and nursing homes.

To find out what people think of Telemedicine services in care homes, Healthwatch spoke to residents, their families and members of care home staff in four care homes in the Bradford and Airedale, Wharfedale and Craven areas.

We found that most residents weren't aware of the Telemedicine service. Many of the families and the care home staff we spoke to were very positive about the difference it could make to people, by reducing unnecessary visits to hospital.

Our report is being used by the Vanguard team to help them improve communication about the service, and encourage more people to use Telemedicine.



What we've learnt from visiting services

Our trained volunteers have carried out three 'Enter and View' visits this year.

Supported Living Services

- St John of God Hospitaller
- Ambler Way

We carried out visits to these two learning disability services in Bradford, as people using these services can be vulnerable and often their voices are not heard. These visits provided an opportunity to independently gather the views of the people using the services and their families and carers and find out how the service worked for them. This also allowed Healthwatch to further develop our work in training and supporting volunteers with learning disabilities.

These visits provided an opportunity to highlight areas of good practice to feed back to the service provider and commissioner.

Stroke Rehabilitation Ward, Airedale Hospital

The visit gave an opportunity to gather experiences of stroke rehabilitation on Ward 5 at Airedale General Hospital, following changes to the pathway for stroke patients.

We had heard some concerns about a lack of specialist care and therapy at the weekend, and that some people did not get enough support after leaving hospital.

We wanted to ask patients and carers if psychological support had been available, following our previous work on long term conditions and mental health.

Healthwatch also wanted to find out what support was available upon discharge, including community and voluntary sector services.

After our visit we made a number of recommendations for changes that would improve patient experience. This included increasing the opportunities for social interaction on the ward, and ensuring that ongoing support for emotional wellbeing is in place.

After every visit, our reports are shared with the service provider and commissioner.

Reports are also published online at healthwatchbradford.co.uk/enterandview

Local Healthwatch organisations have statutory powers which enable us to 'Enter and View' health and social care services. These visits allow lay people to see how services are being run and talk to the people who use them. The feedback from our volunteer-led visits helps services to see things from a different perspective.



*Helping you find
the answers*

How we have helped the community access the care they need

We give local people the answers they need in three ways:

- dedicated phone line and email
- digital information provision
- face-to-face at outreach sessions and events

Many of our enquiries are from people looking for help with making complaints. We make referrals to the local Independent Complaints Advocacy Team, and let people know about self-help complaints tools available online.

Through our website, social media, and ebulletins we also give local people information about changes in health and care, and opportunities to get involved.

Helping people get NHS dentist appointments

It can be really hard to find a dentist in Bradford District that's taking on NHS patients. So while we continue to work with commissioners about ways to improve access, we've also been doing what we can to help people make an appointment.

Many people told us how they'd searched for a dentist on the NHS Choices website, but that it had returned no positive results and they didn't know what to do. We realised that some of the availability provided by practices listed on the website was incomplete or out of date.

We want people to have the latest information, so a Healthwatch volunteer comes into the office every fortnight to ring all dental practices in the area to identify if any have available appointments.

Since we set up the ring around in early 2017, we have been able to help several people find a dentist in Bradford.

One of the people we helped was a single parent with anxiety and agoraphobia - she couldn't travel a long way to be seen because of her conditions. Fortunately, we managed to put her in touch with a practice nearby.

Another woman told us that in the three years since her family moved to Bradford, she hadn't been able to find a dentist to take them on. We were able to give her the details of two practices in the area accepting NHS patients, and she made appointments for herself and her children.

“Thank you so much for your help! I have finally managed to book an appointment. I don't know you but you made my day.”





*Making a
difference together*

How your experiences are helping influence change

Healthwatch Bradford and District use the insight we gather from the public to produce influential reports and recommendations.

The experiences people share with us have real power. Healthwatch makes sure that the right people hear these stories, respond to our recommendations, and take action to improve health and social care services.

We meet regularly with local NHS and social care providers and commissioners to maintain a positive working relationship. We take part in many meetings and committees where we bring people's views and experiences into decision making about the future of local health and care, including the Joint Quality Committee of the Clinical Commissioning Groups, the local A&E Delivery Board, and the Adult Safeguarding Board.

Providers and commissioners are asked to respond to all our reports and recommendations, and wherever possible these responses are shared with the public. Local service providers respond in an appropriate and timely way.

People's experience of care after a stroke

Across West Yorkshire and Harrogate, the NHS is looking at how stroke services can be improved to ensure everyone has the best chance of a good outcome. We worked with Healthwatch across the region to develop a shared approach to engagement that worked in each local area.

Healthwatch Bradford had previously undertaken engagement on stroke services in 2015 - when the Hyper Acute Stroke Unit (care in first 72 hours after stroke) was changed so that all patients across the Airedale, Wharfedale and Craven, and Bradford areas receive the first part of their care at Bradford Royal Infirmary.

In February 2017, we built on this work, to find out more about what it was like for patients going through the new stroke pathway.

We talked in-depth to sixteen patients or carers who had recently experienced care after a stroke. Their views and experiences have been written into a report which will influence the future of stroke services across the region.

Healthwatch Bradford and District also supported engagement activities throughout West Yorkshire and Harrogate, encouraging participation in online surveys and attending public meetings.

Access to NHS dentists

Healthwatch Bradford and District has made our concern about access to NHS dentists well-known. Last year, we spoke to over a thousand people and found that 40% did not have access to an NHS dentist.

This year, we've continued to keep the issue on our priority list. In October 2016, we presented the findings of our work to the Bradford Health and Social Care Overview and Scrutiny Committee. Members of the committee felt that our work highlighted significant issues, which should be escalated to a West Yorkshire level.

Our report created lots of media interest, including coverage of accounts from people who'd had to resort to 'DIY dentistry' - taking their own teeth out or buying kits to fill cavities.

In November 2016, findings from Bradford and Kirklees were central to a Healthwatch England report on people's experiences of NHS Dentistry.

Working with colleagues in Kirklees, we presented to the joint Overview and Scrutiny Committee for West Yorkshire in March 2017, where NHS England and other stakeholders were invited to account for what action they were taking to address the problem.

The issue of access to dentists in Bradford hasn't been solved, and we will keep pursuing different ways to tackle the problem.

With our Kirklees colleagues we've agreed a joint approach with the Chief Dental Officer to look at the average length of time between dentist appointments - exploring whether increasing the recall interval for adults with healthy teeth would free up capacity for those who need it.

We're challenging local and regional commissioners to make sure that inequalities in access to NHS dentistry are tackled, and that future services are designed to meet the needs of local communities.



Working with other organisations

We continue to build our relationships with the CQC, and share our insight to help inform and shape their inspections of local health and social care services.

We submitted a significant volume of information to the CQC team for their inspection of Airedale NHS Foundation Trust in March 2017 - this report has not yet been published.

We also took part in Quality Summits led by the CQC for the inspection reports of Bradford Teaching Hospitals NHS Foundation Trust published in June 2016. Healthwatch Bradford and District routinely shares information with the CQC where concerns are raised about the quality of services. This year, we have not made any specific recommendations for thematic or responsive investigations.

Insight from Healthwatch Bradford and District has contributed to national policy work on many issues. Healthwatch England featured work from Bradford in two national reports:

Autism services for children and young people - findings from the Healthwatch network

Access to NHS Dental Services: What people told local Healthwatch

Complaints advocacy

Healthwatch have strengthened our relationship with the local Independent Complaints Advocacy Team (ICAT) this year.

We held a joint staff briefing where all members of the team were able to talk about the different roles of the Healthwatch and ICAT teams, and explore options for better sharing of both insight and resources. We'll continue to develop this in 2017/18, to make sure that the experiences of people making complaints feed in to the wider picture of how services can improve across the district.

We have strong working relationships with our neighbouring local Healthwatch in West Yorkshire and with the network as a whole. We collaborated closely as Sustainability and Transformation Plans emerged, working across the West Yorkshire and Harrogate footprint and ensuring that Healthwatch was in a position to encourage system leaders to engage effectively with the public.

Andrew Jones speaking at Healthwatch England Conference



***It starts
with you***



#ItStartsWithYou

John and David came to Healthwatch for advice and information.

Their story sparked an ongoing piece of work that is helping improve the diagnosis pathway for adults with autism.

John is in his 60s and has just received a diagnosis of autism. If his relative and carer, David, hadn't come to Healthwatch, John might still have been on the waiting list for assessment.

David approached Healthwatch back in 2015 to tell us about John, who showed many signs of being on the autistic spectrum but didn't have a diagnosis or support. Without a diagnosis, the family couldn't receive any support to manage John's needs and have long term health conditions themselves. The family had been to the GP who said he'd make a referral for initial assessment at the diagnostic service for adults; the referral was made two months later.

In 2016, David got in contact again to tell us that the initial assessment hadn't happened because the assessment team said they did not have the right information from the GP. We followed this up with the GP practice, who demonstrated that all required information had been sent. The Practice Manager was told that John's referral had been accepted but unfortunately there was now an 8 to 9 month waiting list.

Healthwatch worked with the family and Practice Manager to challenge this as the original referral from the GP had been made some months earlier. John had a screening interview two months later and was told he would go forward for a full assessment, but that he was 60th on the waiting list.

The long waiting times faced by John and his family were mirrored in the stories of other people who contacted us, so Healthwatch launched a project on autism. We met face-to-face with carers of people on the autism spectrum to find out more. Trends emerged from what people were saying and we raised our concerns with the CCGs, council and Autism Partnership Board, and published a report on our findings.

Shortly after the publication of our report in January 2017 we heard that commissioners had awarded the adult diagnostic service a 45% increase in its ongoing funding.

David told us that as a result of pressure from Healthwatch, and the increased capacity in the diagnosis team, people on the waiting list are now being prioritised based on need. This meant that John was given a full assessment and received a diagnosis of high-functioning autism.

“John's become an expert in autism. He feels happier in himself because it helps explain so much about his life.

“With your help it's amazing how far we've got - I think without you, he'd still be waiting.”

#ItStartsWithYou

Helen's comment to Healthwatch about visiting A&E prompted a 'stepup' for families.

This year we visited Airedale General Hospital's A&E department and spoke to people while they were waiting to be seen. People told us about their experience throughout the department from arrival to treatment, investigations and being discharged home.

The department had been newly refurbished and most people were very impressed with the new facilities.

But Helen, who'd brought her child to A&E after a fall, told us that she'd had difficulties when taking her daughter to the toilet. She pointed out that although there was a dedicated children's area, the toilet was still at adult height. She said that adding a step in the children's toilet would enable younger children to use it more easily.

We fed this back to the staff in the department, who ordered a step for the children's toilet. They told us it was great to have feedback via Healthwatch about things which patients might not want to mention to nursing or medical staff, but which could make a big difference to someone's experience of the department.

Helen's comment also prompted them to look again at the facilities in the department. They made other improvements, like adjusting the layout of the baby changing space, putting signs on the breastfeeding room, and making magazines available in the waiting area.

You can read more about our visits to A&E departments at Airedale General Hospital and Bradford Royal Infirmary on page 11.

“The Healthwatch report gave us a great insight into what it is like to be a patient in our department. As a member of staff, I have never used the toilets in the children's waiting room, and would never have thought about a step for the toilet, and it was so easy to sort. It has taken us longer to tackle some of the other issues raised, but the report has spurred us on to further improve the service we deliver.”

Sally-Anne Wilson,
Consultant in Emergency Medicine



What next?

Healthwatch Bradford and District's priorities come from what local people tell us matters most. We will make sure that our work continues to be rooted in the experiences of local communities by building up our programme of outreach and engagement, and forging new connections with groups across our District.

Healthwatch is a tenacious organisation, continuing to follow up on issues we've identified and challenging for positive change. Our work on the experiences of people with Autistic Spectrum Conditions will continue, and we'll work to keep it on the agenda of those providing and commissioning services across the District.

We're also going to revisit our work on Urgent & Emergency Care, to uncover more about what the system needs to put in place in order to help local people get the right care, in the right place, when they need it.

With increasing strain on social care services, Healthwatch Bradford and District will work to make sure that people who rely on these services have an opportunity to speak out.

We'll use our visits to services and engagement activities to identify areas of good practice that can be spread across services and help find people-powered solutions to the challenges in health and social care.

Our volunteers are vital to our ability to make a difference in health and social care. We'll grow our numbers of volunteers and develop new, rewarding opportunities for local people to get involved.

Health and social care is changing. As plans are realised to implement the Five Year Forward View and as Sustainability and Transformation Partnerships develop, Healthwatch will help local people understand and influence the decisions which are being made.

We'll continue to work together with colleagues across the West Yorkshire and Harrogate region, to maximise the voice of Healthwatch and the communities we represent.

Healthwatch will encourage effective engagement and consultation on changes which impact on local communities. We'll work to make sure that decision-makers take into account the impact on vulnerable groups and address the challenge of the significant health inequalities which face our District.

We'll help facilitate honest dialogue - with local people having a voice and being part of a process that will shape the future of health and social care.



Our people



Our staff



Healthwatch Staff: Sally Horner, Catherine Wallis, Victoria Simmons and Paula Smith

Building on this year's theme of 'It Starts With You' we asked each member of the current team to tell us their highlight of our work in 2016/17.

Catherine Wallis

Communication and Outreach Assistant

"I'm pleased with the range of things that I've been involved with since I joined the team. I really care about our work on autism and will help make sure we don't lose momentum in the coming year. I take pride in really listening to people's stories during outreach - something people often feel no one else has done."

Paula Smith

Development Worker

"I've been working with Healthwatch since February and I am honoured to listen to people's views, particularly from community groups facing health inequalities. My proudest moment so far was hearing from South Asian Women at a local community centre. Some of the women were able to speak little or no English - being able to gain their views was imperative as they are more likely to experience poorer health outcomes."

Sue Howard

Development Worker

“I have worked for Healthwatch for a number of years and am still passionate about trying to make a difference to health and social care in Bradford and District. I am pleased that our work on autism has resulted in some real changes, and that it has highlighted the plight of families, carers and those on the spectrum themselves.”

Victoria Simmons

Manager

“One of the things that really inspired me this year was hearing parent carers of disabled young adults speaking up in a council meeting. Their stories were powerful and conveyed much more than reports full of numbers and jargon ever could. And helping them to feel their voices had been heard was so important to me.”

Sally Horner

Volunteer Coordinator

“Since becoming Healthwatch’s Volunteer Coordinator in Autumn 2016, I have been really proud of recruiting new volunteers and reestablishing our relationships with existing volunteers who might have felt under-utilised in the past. It’s great to see them getting involved and learning new skills.”



Our volunteers

Volunteers have played a vital role in helping us carry out our statutory activities this year in a range of roles: by gathering people's views in outreach sessions; recording information and data on our system for analysis; planning and conducting Enter and View visits; and helping spread the word about Healthwatch.

In autumn 2016 Sally Horner took on the newly created role of Volunteer Coordinator. Since then she has reestablished relationships with volunteers through refresher training and has opened up all volunteer opportunities to all active volunteers. She has attended Bradford College recruitment fairs, in addition to advertising at the volunteer bureaux, and succeeded in recruiting three new students, who now regularly undertake outreach at the BRI. Taking on these young people has brought a fresh perspective, especially as they can all speak additional languages.

We are also using our volunteers in new ways. One volunteer regularly rings dental surgeries to gain up to date information on availability, so we can more effectively signpost members of the public who contact us.

In December we invited our volunteers to a festive 'Crafternoon' in aid of mental health charity, Mind, to get together and thank them for their hard work.

Our volunteers are positive about their role, both in terms of our work and their own development:

"I enjoy volunteering for Healthwatch as I want to give something back to the health service and want to give the general public an anonymous voice."

"Volunteering with Healthwatch has helped build my confidence and given me new training opportunities. It has been a chance to meet like-minded people."

Involving local people in our work

Healthwatch supports and encourages local people to get involved in the planning and commissioning of local health and social care services.

We regularly promote consultations that are taking place and advertise opportunities for people to get involved.

Many of our volunteers have also been connected through Healthwatch to other initiatives, such as PLACE assessments (Patient Led Assessment of the Care Environment), becoming Trust governors, or taking part in Patient Participation Groups or other forums.

Healthwatch Bradford Volunteers travelled to Leeds to take part in a food tasting session that aimed to improve patient menus at hospitals across West Yorkshire.

Our Board and decision making

Our lay Board make sure that our workplan is grounded in the views and experiences of local communities. They set the priorities and strategic direction for Healthwatch work, and use their well-established connections with community organisations to help maximise our impact.

Board members are volunteers, representing service user groups or partnerships from across Bradford District. During 2016/17 the following people served as Board members.

- Chair - Javed Khan
- Representative of AWC CCG Patient Network - Heather Ogden
- Representative of Bradford City & Districts CCG Patient Network - Susan Crowe
- Service user from Strategic Disability Partnership - Paul Anderson
- Service user from Older People's Partnership - Pam James
- Service user with experience of mental health services - Trevor Ramsay
- Service user from Adult & Community Services - Emmerson Walgrove
- Carer drawn from the Carers' Partnership - Julie Bruce
- Delegate of the Young Lives Forum - Peter Horner
- Delegate of the Equalities Forum - John Samuel

- Health and Social Care academic - Professor Gerry Armitage
- Community Action Bradford and District Trustee - Isobel Scarborough

All members of our Board have signed a Code of Conduct, and they work in partnership with the staff team and the Community Action Bradford and District Board to oversee the performance of Healthwatch Bradford and District.

In April 2017, we reviewed our Board structure and are recruiting new members to ensure that we continue to have the most effective representation for our District. A list of current Board members is published and kept updated on our website.

The contract for Healthwatch Bradford and District was re-awarded to KIVCA in August 2016.

In April 2017, KIVCA merged with two other local organisations - Bradford CVS and Shipley & Bingley Voluntary Services - to form a new district-wide charity. Community Action Bradford & District is an umbrella body for voluntary organisations, with offices in Bingley, Bradford, Ilkley and Keighley, providing outreach support across the district. The Healthwatch contract transferred to the Community Action Bradford and District in 2017.



Our finances

Bradford Council put the contract to deliver Healthwatch services out to tender during summer 2016. This contract was reawarded to KIVCA (now Community Action Bradford and District) from August 2016. The financial year 2016/17 therefore spans two different contracts.

From August 2016 the annual contract value was reduced from £223,692 in 2015/16 to £180,000.

During the re-procurement process, Healthwatch Bradford unfortunately lost some members of staff, who chose to find more secure jobs. This resulted in an underspend on our budget during the first few months of the new contract.

Income	£
Funding received from local authority to deliver local Healthwatch statutory activities	187,138
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Expenditure	£
Staffing costs	128,487
Management fees	18,456
Volunteers & Board costs	6,575
Business costs	5,018
IT & Website costs	4,534
Travel	2,540
Training & recruitment	1,264
Event costs	1,246
Communications & Marketing	788
Total expenditure	168,908
Balance brought forward	18,230

Healthwatch Bradford and District is also sometimes asked to deliver specific engagement projects on behalf of other organisations, this generates additional income which can be reinvested in Healthwatch core work.



Notes



Notes

We will be making this annual report publicly available on 30 June 2017 by publishing it on our website and sharing it with Healthwatch England, CQC, NHS England, Clinical Commissioning Group/s, Overview and Scrutiny Committee/s, and our local authority.

We confirm that we are using the Healthwatch Trademark (which covers the logo and Healthwatch brand) when undertaking work on our statutory activities as covered by the licence agreement.

If you require this report in an alternative format please contact us at Healthwatch Bradford, Central Hall, Alice Street, Keighley, BD21 3JD.

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